



TESTIMONY BEFORE THE PUBLIC HEALTH COMMITTEE
REGARDING HB 6678
AN ACT CONCERNING REVISIONS TO DEPARTMENT OF PUBLIC HEALTH
LICENSING STATUTES

March 16, 2009

Senator Harris, Representative Ritter and members of the Public Health Committee, my name is Kimberly Skehan, RN, MSN and I am Vice President for Clinical & Regulatory Services for the Connecticut Association for Home Care & Hospice, whose members serve over 100,000 elderly, disabled, and terminally ill Connecticut citizens.

The Association **supports** Section 16 of HB 6678, which will align the frequency of State of CT licensure inspections (currently every two years) with Medicare certification surveys for home health agencies (currently every three years). We have a minor suggestion for wording revisions attached. This is a common sense proposal that will help both the State and home health agencies conserve resources, while maintaining appropriate quality oversight.

The Association has received clear direction from the General Assembly to provide ideas that would make the system more efficient in these difficult budget times. This proposal would eliminate unnecessary duplication of Department of Public Health (DPH) federal surveys and State licensure inspections within a short period of time when no quality of care issues have been identified.

Aligning federal survey and State licensure inspections would free up DPH surveyors to focus their efforts on agencies requiring extra attention. This proposal does not limit surveys for complaints or quality of care issues; complaints or problems will result in more frequent surveys as per Medicare survey frequency requirements.¹

¹ CMS State Operations Manual PUB 100-7, Chapter 2, Sections 2008E-2008F

We support continued oversight by DPH to ensure quality of care and have enjoyed a collaborative relationship with the Department, working together to ensure that quality care is provided to our patients at home. DPH attempts to coordinate and minimize survey redundancy, but it still occurs. Aligning routine surveys will save resources for both the State and home health agencies, as the survey process involves considerable time to coordinate and involves many staff members, and they routinely last about one week.

This is an example of one proposal that our Association and members support to improve regulatory efficiency and meet the needs of patients at home. In addition, the Association would support a proposal for a 2-year moratorium on licensure of new home health agencies in order to further free up DPH resources to focus on existing agencies and prevent new agencies from entering the market and “cherry-picking” Medicare patients to the exclusion of Medicaid. Existing member agencies have identified declining Medicare referrals as a major problem. A two-year moratorium on new home health agencies would provide time for a more comprehensive approach to rethinking the regulatory structure of home care and addressing inadequate Medicaid rates.

In summary, we support these proposals as a way to decrease burden on the State and home health agencies and to avoid duplication of efforts while maintaining appropriate oversight. We look forward to working with the General Assembly to insure that our CT citizens receive appropriate, high quality home care services.

Thank you for consideration of our testimony. I will be pleased to answer any questions you may have.

Proposed wording revision to Section 16, HB 6678:

“...unless such institution is also certified as a provider under the Medicare program and such inspection would result in more frequent reviews than are required under the Medicare program for home health agencies, *in which case such institutions will be inspected in accordance with the Medicare survey frequency.*